## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

YOR 920020050

| CLAIMS AS FILED - PART I (Column 1)  |  |   |                   |                      | (Column 2)                      |                      |         | SMALL ENTITY TYPE   |                        | OR      | OTHER THAN R SMALL ENTITY  |                        |
|--|--|---|-------------------|----------------------|---------------------------------|----------------------|---------|---------------------|------------------------|---------|----------------------------|------------------------|
| TOTAL CLAIMS ( O   |  |   |                   |                      |                                 |                      |         | RATE                | FEE                    |         | RATE                       | FEE                    |
| FOR NUMBER FILED   |  |   |                   |                      | NUMBE                           | R EXTRA              |         | Basic FEE           | 370.00                 | OR      | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS ( O minus 20=  |  |   |                   |                      | • 6                             |                      |         | X\$ 9=              |                        | OR      | X\$18=                     |                        |
| INDEPENDENT CLAIMS 2 minus 3 :   |  |   |                   |                      | . 0                             |                      |         | X42=                |                        | OR      | X84=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                   |                      |                                 |                      |         | +140=               |                        | OR      | +280=                      |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |                   |                      |                                 | otumn 2              |         | TOTAL               |                        | OR      | TOTAL                      | 740                    |
| CLAIMS AS AMENDED - PAR<br>(Column 1) (Colum   |  |   |                   |                      | TII                             |                      |         | SMALL ENTITY        |                        | OR      | OTHER THAN<br>SMALL ENTITY |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER              |                   | HIGH<br>NUM<br>PREVI | EST<br>IBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA     |         | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | * ()                                      | Minus             | <u></u> )            | Ø                               | -\                   |         | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | ٠ ٧                                       | Minus             | ***                  | 3                               | - \                  | 1       | X42=                |                        | OR      | X84=                       |                        |
| <  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                      |                                 |                      | J       | +140=.              |                        | OR      | +280=                      |                        |
|  |  |   |                   |                      |                                 |                      |         | TOTAL<br>ADDIT, FEE |                        | OR      | TOTAL<br>ADDIT, FEE        |                        |
| Column 2) (Column 3)   |  |   |                   |                      |                                 |                      |         |                     |                        |         |                            |                        |
| AMENDMENT B  | V  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUA<br>PREV          | HEST<br>MBER<br>KOUSLY<br>OFOR  | PRESENT<br>EXTRA     |         | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 10                                      | Minus             | **                   | 10                              | = /                  | 1       | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | . 2                                       | Minus             | ***                  | <del>)</del>                    | -/                   | ]       | X42=                |                        | OR      | X84=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                      |                                 |                      | J       | +140=               |                        | OR      | +280=                      |                        |
|  |  |   |                   |                      |                                 |                      |         | TOTAL<br>ADDIT, FEE |                        | OR      | ADDIT, FEE                 |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                   |                      |                                 |                      |         |                     |                        |         |                            |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIG<br>NUI<br>PREV   | HEST<br>MBER<br>TOUSLY<br>D FOR | PRESENT<br>EXTRA     |         | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus             | de di                |                                 |                      |         | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | •   | Minus             | ***                  |                                 | •                    | 1       | X42=                |                        | OR      | X84=                       |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                      |                                 |                      |         | +140=               |                        | OR      | +280=                      |                        |
| # Mithe pertry in column 1 is loss than the entry in column 2, write "0" in column 3.  |  |   |                   |                      |                                 |                      |         |                     |                        | OR      | TOTAL                      |                        |
| "If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Pald For" (Total or independent) is the highest number found in the appropriate box in column 1. |  |   |                   |                      |                                 |                      |         |                     |                        |         |                            |                        |
|  | The "Highest Nur                               | mber Previously P                         | eld For" (Total o | n naeber             | क्षाप् ७ प                      | न प्रतिभवन्त्र प्रता | west (I | were as any oth     | ita ota ama or         | , a 1 0 |                            |                        |